

Abbreviated Minutes

Patient-Centered Health Advisory Council

Polk County River Place- Friday, February 10th, 2017

Agenda

<p>Legislative Discussion</p> <p>Angie Doyle Scar Council Discussion</p> <p><i>Handouts:</i></p> <ul style="list-style-type: none"> • House Study Bill 25 • IDPH 2017 Session Omnibus Bill-Memo 	<ul style="list-style-type: none"> • The language describing the work of the Patient-Centered Health Advisory Council can be found on page 2 of House Study Bill 25. This updated code language better aligns with the current scope of work of the Council. It formalizes the name of the Council and lists the new responsibilities of the Council: <ul style="list-style-type: none"> ○ To serve as a resource on emerging health care transformation initiatives in Iowa. ○ To convene stakeholders in Iowa to streamline efforts that support state-level and community-level integration and focus on reducing fragmentation of the health care system. ○ To encourage partnerships and synergy between community health care partners in the state who are working on new system-level models to provide better health care at lower costs by focusing on shifting from volume-based to value-based health care. ○ To lead discussions on the transformation of the health care system to a patient-centered infrastructure that integrates and coordinates services and supports to address social determinants of health and to meet population health goals. ○ To provide a venue for education and information gathering for stakeholders and interested parties to learn about emerging health care initiatives across the state. ○ To develop recommendations for submission to IDPH related to health care transformation issues. <p><u>Social Determinants of Health (SDH)</u></p> <ul style="list-style-type: none"> • The SDH Issue Brief includes an overarching recommendation around SDH: “The Council supports the integration of SDH as the standard of care in Iowa and supports policies, programs and initiatives aimed to address social determinants of health and promote health equity.” An addendum to the issue brief will be created that will include additional recommendations around SDH that are more concrete and tangible. Another addendum to the issue brief that will be created is a list of programs in Iowa that address SDH. • “A New Way to Talk About Social Determinants of Health” by the RWJF was created a number of years ago and has been mentioned recently at numerous meetings, therefore was included as a handout for the Council to revisit and be aware of as we continue to focus on social determinants of health. The document provides guidance on how to message SDH including best practices in language and choosing words.
<p>Iowa’s Statewide Strategies</p> <p>Kady Reese – Iowa Healthcare Collaborative</p> <p><i>PowerPoint:</i></p> <ul style="list-style-type: none"> • Iowa’s Statewide Strategic Plans- PPT 	<ul style="list-style-type: none"> • A number of Iowa Statewide Strategic Plans have been developed which are consensus and guidance documents outlining goals and actions to address an identified priority health issue, promote alignment of resources and efforts, and advance the health and wellness of Iowans. They are designed to establish a statewide standard of care and are working documents that will be reviewed on a continuous basis and modified as needed. The current Statewide Strategic Plans include: Care Coordination, Diabetes, Healthcare Associated Infections, Medication Safety, Obesity, Obstetrical Care, Person and Family Engagement, and Tobacco. A Social Determinants of Health Statewide Strategic Plan is in development and a Falls Prevention Statewide Strategic Plan will be developed. Feedback from the Patient-Centered Health Advisory Council is encouraged regarding the identification of gaps and suggestions of additional plans. Council members are encouraged to share these Statewide Strategies with their partners.
<p>Iowa Department of Corrections (IDOC)</p> <p>Letti Prell - Iowa Department of Corrections</p> <p><i>Handout:</i></p> <ul style="list-style-type: none"> • Iowa Department of Corrections Position Paper 	<ul style="list-style-type: none"> • Around 57 percent of those in Iowa prisons have a chronic mental health diagnosis. About 33 percent have a serious mental illness, and another 24 percent have some other chronic mental health diagnosis. Offenders with mental health diagnosis are more likely to return to prison. The number one diagnosis is chronic substance use disorder. A main barrier is that corrections and mental health treatment providers do not know which medications incoming offenders with mental illness are taking or should be taking. The result is delays in treating offenders while new medication assessments are made. • Currently, offenders who leave the prison system are given a 30-day supply of medications, which is often not long enough to establish a source of continuous medication therapy. For offenders with behavioral health disorders, discontinuing many types of psychiatric medications can lead to reoffending. To address the short-term behavioral health medication needs, a pilot project with the IDOC Central Pharmacy was launched to provide 90 days of behavioral health prescriptions for offenders released from an IDOC prison. • The Mental Health Information Sharing Program was described. If an individual admitted to prison indicates they received services from Eyerly Ball, a process is initiated to sign a release of information using an electronic signature. A secure exchange from the IDOC medical database to Eyerly Ball’s medical database is initiated to request an offender’s medical information, requiring no human interaction.

<p>Therapeutic Alternatives to Incarceration</p> <p>Annie Uetz - Polk County Health Services</p> <p>PowerPoint: • Therapeutic Alternatives to Incarceration- Polk County Health Services PPT</p>	<ul style="list-style-type: none"> Polk County Health Services coordinates services to Polk County residents around mental health, intellectual disability, developmental disability, and substance abuse. Services available include: <ul style="list-style-type: none"> Jail Diversion- aimed to prevent/minimize the number of mentally ill individuals in jail by providing supportive services during incarceration followed by community-based treatment upon release. Mobil Crisis Response Team- provides short term crisis management for individuals experiencing a mental health crisis. It is a collaborative effort where registered psychiatric nurses and mental health professionals are dispatched at the request of law enforcement. Crisis Stabilization Center- a short-term, intensive, community-based treatment program with home-like atmosphere that is designed for adults who are experiencing a crisis related to a mental health condition. Individuals can stay from 5-90 days with the goal of stabilizing them so that they can return to the community with an increased level of functioning. Crisis Observation Center- offers a safe place to stay for up to 23 hours and assists individuals experiencing a mental health crisis which cannot be resolved at home, but does not require hospital level of care. A multi-disciplinary team meets to identify issues and assists with discharge planning. The Stepping Up Initiative is a national initiative to reduce the number of people with mental illness in jails. In Iowa, 32 counties have joined the initiative. The initiative offers technical assistance including resources/toolkits and a National Summit in April 2016. An Iowa Summit is currently being planned. The Data Driven Justice Initiative was launched by the Obama Administration in June 2016 to use strategies to divert low-level offenders with mental illness out of the criminal justice system, so that low-risk offenders no longer stay in jail simply because they cannot afford a bond. The SOAR Program is assistance in applying for Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI), which can be complicated and difficult to navigate. Sobering Centers are a new approach toward addressing problems with intoxicated individuals on the streets. Individuals go to the Sobering Center instead of jail, and receive treatment services.
<p>SafetyNetRx Pharmaceutical Safety Net Programs to Address Recidivism</p> <p>Jon Rosmann - SafetyNetRx</p> <p>PowerPoint: • SafetyNetRx Pharmaceutical Safety Net Programs- PPT</p>	<ul style="list-style-type: none"> SafetyNetRx (formerly the Iowa Prescription Drug Corporation) was established in 2001 to provide pharmaceutical access to Iowans who cannot afford prescription drugs. The program serves Iowa's safety net patients who are uninsured or underinsured Iowans with incomes 200 percent FPL or below. The 10 most populated counties in Iowa average 2,300 people per day in total within the jail system. Last year, Polk County discharged 20,000 individuals. To effectively reduce the rates of recidivism in Polk County, offenders identified as having a mental illness should be targeted. In the Polk County Jail, 25 percent of inmates, those potentially having a mental illness, accounted for 44 percent of all bookings. Individuals released from prison are given a 30-day supply of all current medications upon release. County jails provide no supply at the time of release. This is not an adequate amount of time to establish a medical provider to receive a new prescription. Additionally, the average waiting period to see a behavioral health provider in Polk County is 80-100 days. SafetyNetRx offers a number of programs: <ul style="list-style-type: none"> County Jail Behavioral Health Medication Assistance Program- allows individuals released from a county jail located in Polk, Dallas, Story, Pottawattamie, or Black Hawk counties, who are unable to pay for behavioral health medications to receive primary health care services and up to 90 days of behavioral health medications at no cost. Behavioral Health Medication Voucher Program-provides free behavioral health medications to safety net patients of Iowa's FQHCs. IDOC Behavioral Health Medication Voucher Program- allows offenders released from one of Iowa's nine DOC facilities with a household income of 200 percent FPL or below to access up to 90-days of behavioral health medications at no cost. Iowa Drug Donation Repository- allows individuals to receive medications and medical supplies for little or no cost. Donations are received from long-term care dispensing pharmacies, retail pharmacies, health providers, and individuals. The medications and supplies are inspected by a pharmacist, distributed to medical providers or pharmacies, and dispensed to Iowans.
<p>Crossroads of Iowa</p> <p>Ruth Hardin - Crossroads of Iowa</p>	<ul style="list-style-type: none"> Crossroads of Iowa is a non-profit organization whose mission is to reduce recidivism for women ex-offenders who have completed treatment for substance addiction. The program provides services at the Polk County Jail. The prevalence of trauma, abuse, and depression among this population is extremely high, and the program focuses on mental wellness using a holistic approach.
<p>Networking Opportunity</p>	<ul style="list-style-type: none"> The 31st Annual Des Moines Civil & Human Rights Symposium is being held on March 15, 2017 at Des Moines University. The theme for this year's symposium is "Poverty Affects All of Us". Discussion took place about future Council meeting topics addressing social determinants of health. Council members are interested in having a future meeting focused on discrimination and equality.
<p>Next Meeting: Friday, May, 19th, 2017 from 9:30 – 3:00 at the West Des Moines Learning Resource Center</p>	